## Department of Veterans Affairs

## APPLICATION FOR SERVICE-DISABLED INSURANCE

PRIVACY ACT INFORMATION: No insurance may be granted unless a completed application has been received (38 U.S.C. 722). The information provided on a voluntary basis, will be used by VA employees and your authorized representative in the maintenance of Government insurance programs. Responses may be disclosed outside the VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 36VA00, Veterans and Armed Forces Personnel U.S. Government Life Insurance Records - VA, published in the Federal Register.

RESPONDENT BURDEN: Public reporting burden for this collection of information is estimated to average 40 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Clearance Officer (723), 810 Vermont Ave., NW, Washington, DC 20420; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (2900-0068), Washington, DC 20503.

You may qualify for up to \$10,000 coverage at regular premium rates even if you have been rejected for insurance by a commercial company or were offered a policy at high premiums because of a disability.

Before you decide to apply for this coverage we encourage you to be a smart shopper and compare our premium rates to a few other insurance companies. After all, life insurance is an important decision and we want you to get the best deal possible for your money. If your disability is not serious, a commercial company may be able to offer you a better deal. Compare their premium rates to the Government Life Insurance rates in VA pamphlet 29-9.

When considering the cost of this coverage, remember that if you become totally disabled and unable to work for six or more months, you do not have to pay premiums on your Government Life Insurance policy. This benefit is added at no extra cost. Most commercial life insurance companies add an additional charge for this benefit.

Do not delay when comparing costs; you have only two years from the date VA notified you of your service-connected disability to apply for our coverage (this time period is reduced to one year if the date VA notified of your service-connected disability was prior to September 1, 1991). If you decide to apply, fill out the application below.

If you have any questions on Government Life Insurance, just call our toll-free number, 1-800-669-8477. We will be on the line ready to help with your questions.

## PLEASE BE SURE TO COMPLETE BOTH SIDES OF THIS APPLICATION

1. NAME AND MAILING ADDRESS FOR INSURANCE PURP	OSES			
FIRST, MIDDLE, LAST NAME				
NUMBER AND STREET OR RURAL ROUTE				
ALVI ATLED IN THE AREA				
CITY, STATE AND ZIP CODE				
2. BENEFICIARY DESIGNATION AND SELECTION OF OPTIC	NAL SETTLEMENT			
COMPLETE NAME AND ADDRESS OF EACH PRINCIPAL AND CONTINGENT BENEFICIARY (If a married woman, enter her own first and middle names. For example, Mary Rose Smith, not Mrs. John Smith.)	BENEFICIARY'S SOCIAL SECURITY NO. (If known, See Important information on reverse)	RELATIONSHIP OF EACH TO THE INSURED	AMOUNT TO EACH Fractions such as 1/2, 2/3, or 3/4)	OPTION FOR EACH (1,2,3, or 4)
				1
				1
				1
OR TO SURVIVORS				1
CONTINGENT (Person(s) who get the proceeds if the principal beneficiary(les) die before the insured. If none, write "NONE".)				
		,		1
				1
				1
				1
OR TO SURVIVORS				1
DO NOT WRITE IN THE	SPACE BELOW - FOR VA	USE ONLY		

VA FORM 29-4364

EXISTING STOCKS OF VA FORM 29-4364, JUL 1992, WILL BE USED.

Continued on Reverse